	For office Use ONLY					For office Use ONLY		
License #	Verified? □	res □No Copied	i? □Yes □No	Apt#:	Move	In Date:	Rent Amt:	
NSTRUCTIONS TO APPL	ICANT:				TIM	BER RI	DGE APARTMENT	
Each Applicant, eighteen (18 Application. When giving Application. When giving Application sub NARNING: This application may any information is false, cannot the Applicant and is refused or (plicants name g bmitted. y be refused and/o be verified, or do	ive complete an or rejected if it is i ses not meet own	nd full name i	ncluding full i	middle na bie; if satis	mes. App	lication must be comple entification is not present	
PRINT Full Name-Last, First, Middle			Date of Birth		Social Security Number		security Number	
P att Addanse.		Phone #:			Drive	ers Licens	#	
E-mail Address: Fresent Address (Number, Street, City, Zip)				How Long?		Monthly Rent		
Present Address (Number, 30)	eet, city, zipj			Total song.	-	and the same		
Do you rent? Apartment I	Company/Landlord, Address & Phone #							
PREVIOUS RESIDENCE				How Long?] aaat-	6. B		
Previous Address: (If less than 2 years)					Month	Monthly Rent		
Did you rent? Apartment Di	Company/Landlord, Address & Phone #							
OCCUPANTS THAT WILL RESIDE WI	TH YOU	72						
		pants that will res	ide with you:					
Full Names and Dates of Birth		oants that will res	ide with you:	Date of Birti	n:			
Full Names and Dates of Birth o Name:		pants that will res	ide with you:	Date of Birti				
Full Names and Dates of Birth o Name: Name: MPLOYMENT	of all other occup	pants that will res				How Los	ne?	
OCCUPANTS THAT WILL RESIDE WI Full Names and Dates of Birth of Name: Name: EMPLOYMENT Employer (If self employed, name)	of all other occup	oants that will res	Phone #:	Date of Birti		How Lor	ng?	
Full Names and Dates of Birth of Name: Name: MATTHE: MPLOYMENT Imployer (If self employed, name)	of all other occup	pants that will res	Phone #: Type of But	Date of Birti		How Los	Phone #:	
Full Names and Dates of Birth of Name: Name: EMPLOYMENT Employer (if self employed, name) Business Address (Number, Str	of all other occup	pants that will res	Phone #: Type of But Su	Date of Birti siness: spervisor:	n:			
Full Names and Dates of Birth of Name: Name: Marne: EMPLOYMENT Employer (If self employed, name) Business Address (Number, Structure)	of all other occup		Phone #: Type of Bu Su Ar	Date of Birti	n:	How Los		
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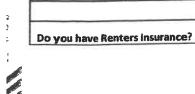
Phone #:

License#

Year

Make

□Yes □No



Address:

Please List ALL Automobiles:

							1		
Have you ever be	en convicted of a	Crime?	□Yes □No	Do you have a pet	Yes□ No□	How Many?	What Type:		
I understand th	at Water beds a	re not welcor	<mark>me at Timb</mark> er R	idge Apartments		initail			
Have you ever be	en Evicted?		□Yes □No						
	FIRST HEAR ABO	OUT OUR COA	ANGLINETY	•					
				- A. A. A NEO					
Internet: 🗆 Goo	gle 🗆 Craigslist	□Our Websi	te Referr	Referral: (who)□					
News/Ads:□	Drive-by: □	Housing Fai	r: 🗆 Housin	Housing Helpers: □(who)					
APPLICATION A	GREEMENT								
PRELIMINARY OF UNIT TO APPLICAND THE LEASE I understand the the security desapplication fees acceptance or of document shall pisclosures APPLICAND investigation in Applicant here shall have the Applicant shall any and all oth change in the light to termin information or offense after in terminate the that he/she will and expressly guarantee that Owner's approrepresentation Owner hereby THE ABOVE INFO	e application feet. This amount wonLy AND DOES CANT. THE RENT AND ALL ADDE to at I have attached to a the refunded denial via phone become part of the refunded to a position of the refunded to the accuracy of the refunded to t	will be retained NOT OBLIGAT AL AGREEMEN NOUMS ARE I seed a deposit in the emises when a district within several to recheck upong and on-gold provided to Ordided by the American of the Application to people of the Application to people of the Application acts of the information to people of the Application to people of the information of the Application to the Application to the Application to the Application of the information of the Informati	d by Owner report TE THE OWNER THE THE OWNER THE THE OWNER THE	of \$ to this apple is executed. All monidays if the application pplication is accepted with application is accepted with a special and criminal amage that may result and ant. Applicant shall prove application, credit, backlete to quit if: 1) it is determined in a special and a	or is approve OR TO DELIVITIL THIS APP lication, that es deposited is denied. On as a resident TRUE AND CO hal history as throm furnist teground and ion containe tomptily notify on. If Applica trect, for exa- policant shall duty to verify f any Applica the each applica to y independent to y ind	d or denied. THIS /ER POSSESION O PLICATION IS APPF will be considere I with Owner, less wner will notify A and enters into a RRECT. I AUTHORIZ Owner may deen hing such informat d in Applicant's re / Owner in writing nt is approved, On Applicant provide mple, Applicant is provide Owner w //, and does not re int. Furthermore, cant. Owner does ent third parties. Or roving or denying suant to Applicant	APPLICATION IS F THE DWELLING ROVED BY OWNER d partial payment of the non-refundable policant of lease agreement, this E Owner to make such appropriate. Ition to Owner. Owner ion. If approved, ental application and g of any subsequent where shall have the ed false or misleading convicted of a sexual ith the option to present or promise Owner has no duty, not represent or		
Signature of the	: Applicant				Date	e			

Signature of West Point Leasing Consultant